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## \*BIBDATASHEET\*

CONFIRMATION NO. 5383

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/469,791	<b>FILING OR 371(c) DATE</b> 12/22/1999 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2616	<b>ATTORNEY DOCKET NO.</b> 2685/5248
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/366,676 08/04/1999 PAT 6,324,279  
 and is a CIP of 09/366,207 08/04/1999 PAT 6,483,912  
 and is a CIP of 09/366,208 08/04/1999 PAT 6,757,290  
 and is a CIP of 09/366,210 08/04/1999 PAT 6,694,429  
 and is a CIP of 09/366,678 08/04/1999 PAT 6,870,845  
 which claims benefit of 60/104,878 10/20/1998  
 and claims benefit of 60/095,288 08/04/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/03/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 33	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

26652

## TITLE

METHOD FOR PERFORMING SEGMENTED RESOURCE RESERVATION

<b>FILING FEE RECEIVED</b> 1810	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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